									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003 \Q\75\267															
CLAIMS AS FILED - PART I SMAI (Column 1) (Column 2) TYPE											OR	OTHER			
TOTAL CLAIMS								RAT	E	FEE	1	RATE	FEE		
FOR NU				MBER FILED NU		ER EXTRA		BASIC	FEE	385.00		BASIC FEE	770.00		
TC	TAL CHARGE	ABLE CLAIMS			•			xs	 9=		OR	X\$18=			
INC	EPENDENT C	LAIMS	minus 3 =		•			X43	=			X86=			
MULTIPLE DEPENDENT CLAIM PRESENT								+14			OR	+290=			
• If the difference in column 1 is less than zero, enter "0" in column 2													720		
3/19 GLAIMS AS AMENDED - PART II OTHER THAN													770		
(Column 1) (Column 2) (Cotumn 3)									LL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID	BER	PRESENT EXTRA		FIAT	٤/	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.17	Minus	-2	Ó	2		XS 9	)=		OR	X218=	·		
	Independent	<u>·3·</u>	Minus	<u>-3</u>		2		X43			OR	X86=			
	FIAST PRESE	NTATION OF MI	ATIPLE DEF	PENDENT	CLAIM		)	+145	2		OR	+290=			
									TAL			TOTAL			
/	0/3/65	(Column 1)		(Colum	n 21	(Column 3)	•	ADDIT. I	FEE	<u> </u>	<b>1</b> 011	ADDIT. FEE			
AMENOMENT 8		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUME PREVIO PAID I	EST BER FUSLY	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NOM	Total	.20	Minus	-20		•	11	XS S	=		OR	X\$18=			
<b>IME</b>	independent			463	3 +-		П	X43	•		OR	X86-			
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	PENDENT	CLAIM		J	+145			OR	+290=			
									TAL		ОЯ	TOTAL			
		•	ADDIT.	FEE		,0,,	ADDIT. FEE								
ENTC		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum Highi NUME PREVIO PAID I	EST BER BUSLY	PRESENT EXTRA		PAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT C	Total	•	Minus	**		•	П	X\$ 9			OR	X\$18=			
	Independent	•	Minus	***		=	П	X43				X86=	$\vdash$		
۷	FIRST PRESE	NTATION OF ML	LTIPLE DEPENDENT CLAIM				A43			OR	^602				
* If the entry in column 1 is less than the entry in column 2, write 'C' in column 3.											OR	+290=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20."  ADDIT. FEE  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT, FEE			
		iber Previously Pai					w for	nd in th	e ap	pr <del>opriate</del> bo	a in co	lumn 1.			
FORM	PTO-675 (Rev 10	NO31					Pat	ent and T	rades	nerk Office, U	.S. DEJ	PARTMENT OF	COMMERCE		

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